

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

1342261

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005

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Name of Offering ( check if this is an amendment and name has changed, and indicate change Class A, B and C Membership Units	e.)
	on 4(6) ULOE 05068981
A: BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
318 State St. Properties, LLC	
Address of Executive Offices (Number and Street, City, State, Zip C	Code) Telephone Number (Including Area Code)
318-324 State Street, Santo Barbara, CA 93101	(805) 685-5002
Address of Principal Business Operations (Number and Street, City, State, Zip ( (if different from Executive Offices)	Code) Telephone Number (Including Area Code)
Brief Description of Business	
Aircrast engine technology	PROCECCE
	other (please specify):  Liminted liability company  PROCESSED  OCT 2 6 2005
Actual or Estimated Date of Incorporation or Organization: Month Year  Actual or Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction)	Estimated  THOMSON  FINANCIAL

## GENERAL INSTRUCTIONS

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### States

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTIO	N
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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

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## FABASIG IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Lewis, Peter Full Name (Last name first, if individual) 318 State Street, Santa Barbara, CA 93101 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Director General and/or Managing Partner Holehouse, John Full Name (Last name first, if individual) 35 W. Micheltorena St., Santa Barbara, CA 93101 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Director General and/or Managing Partner Remeny Family Trust Full Name (Last name first, if individual) 629 Highland Road, Santa Monica, CA 90407 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Director General and/or Managing Partner Murphy, Robert Full Name (Last name first, if individual) 7839 James Island Way, Jacksonville, FL 32256 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Promoter Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

98	B. INFORMATION ABOUT OFFERING								
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No ⊠						
	Answer also in Appendix, Column 2, if filing under ULOE.								
2.	What is the minimum investment that will be accepted from any individual?	\$N/A							
	December 60 to a section of the sect	Yes	No						
3. 4	Does the offering permit joint ownership of a single unit?	×	L						
	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								
	ll Name (Last name first, if individual)								
No Bu	siness or Residence Address (Number and Street, City, State, Zip Code)	———							
No	me of Associated Broker or Dealer								
Su	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers								
	(Check "All States" or check individual States)	. 🔲 All	States						
	AL         AK         AZ         AR         CA         CO         CT         DE         DC         FL         GA           IL         IN         IA         KS         KY         LA         ME         MD         MA         MI         MN           MT         NE         NV         NH         NJ         NM         NY         NC         ND         OH         OK           RI         SC         SD         TN         TX         UT         VT         VA         WA         WV         WI	MS OR WY	MO PA PR						
Fu	Il Name (Last name first, if individual)								
В	isiness or Residence Address (Number and Street, City, State, Zip Code)								
Ni	ame of Associated Broker or Dealer								
St	ates in Which Person Listed Has Solicited or Intends to Solicit Purchasers								
	(Check "All States" or check individual States)	☐ All	States						
	AL         AK         AZ         AR         CA         CO         CT         DE         DC         FL         GA           IL         IN         IA         KS         KY         LA         ME         MD         MA         MI         MN           MT         NE         NV         NH         NJ         NM         NY         NC         ND         OH         OK           RI         SC         SD         TN         TX         UT         VT         VA         WA         WV         WI	MS OR WY	MO PA PR						
Fı	ıli Name (Last name first, if individual)	***	<del></del>						
В	usiness or Residence Address (Number and Street, City, State, Zip Code)								
Name of Associated Broker or Dealer									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers									
(Check "All States" or check individual States)									
	AL AK AZ AR CA CO CT DE DC FL GA  IL IN LA KS KY LA ME MD MA MI MN  MT NE NV NH NJ NM NY NC ND OH OK  RI SC SD TN TX UT VT VA WA WV WI	MS OR WY	MO PA PR						

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Equity ...... \$ Common Preferred Convertible Securities (including warrants) ....... Partnership Interests ...... Answer also in Appendix, Column 3, if filing under ULOE, 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount Investors of Purchases Accredited Investors 9 4,600,000.00 Non-accredited Investors 0 S Total (for filings under Rule 504 only) 9 4,600,000.00 Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of Offering Security Sold Rule 505 ..... N/A \$ 0.00 Regulation A ..... N/A \$ 0.00 Rule 504 N/A \$ 0.00 Total ..... N/A S 0.00 Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees ..... Printing and Engraving Costs \$ Legal Fces 5,000.00 Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) П S Total ..... 5,000.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMB	er of investors, expenses and use of p	ROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C—Q proceeds to the issuer."	uestion 4.a. This difference is the "adjusted gross		\$ 4,595,000.00
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of t proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and he payments listed must equal the adjusted gross		
			Payments to	
			Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	Г	¬s 0.00	□s
	Purchase of real estate			\$ 4,595,000.00
	Purchase, rental or leasing and installation of mach	linery		
	Construction or leasing of plant buildings and faci			
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset issuer pursuant to a merger)	e of securities involved in this is or securities of another		<u> </u>
	Repayment of indebtedness			
	Working capital	<del>_</del>		
	Other (specify):			□ \$
				- <del> </del>
			\$	
	Column Totals	[	so.oo	S 4,595,000.00
	Total Payments Listed (column totals added)		<b>□</b> \$	4,595,000.00
E		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the mature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accr	ish to the U.S. Securities and Exchange Commis	sion, upon writte	
Is	suer (Print or Type)	Signature 7	Date	107/1-
31	8 State St. Properties, LLC	112	9/	27/05
NE	me of Signer (Print or Type)	Title of Signer (Print or Type)		
Pe	ter Lewis	Manager		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)